

Arthritis

Principal Provisions of DRMP Guidelines

A. General

- 1. Purpose of the DRMP program is to support the planning and development of pilot arthritis centers.
- 2. A pilot arthritis center is comprised of an institution, or a group of institutions and facilities which jointly extend comprehensive services, and the population area which it/they principally serve. Pilot projects improve or expand planning or development of the institution, and/or the mechanisms through which it reaches the patient population.
- 3. The character approvable pilot arthritis proposals is feasibility, or start-up.

B. "Must" Requirements

- 1. Proposal must be approved by the RMP's RAG
- 2. Purpose must relate to defined needs
- 3. Activities must relate, and build on existing resources, capabilities.
- 4. Activities must presently, or in projection of impact, result in improved quality of care, access to care, and/or linkage and coordination of resources.
- 5. Proposal must relate to a plan which establishes the scope of the proposal as an effective contribution to broader care organization and delivery needs.
- 6. Activities must be capable of completion within the funded period, or present evidence of reasonable likelihood of continued support with non-RMP resources.
- 7. Proposals must include an evaluation plan, or activity, which appears pertinent and effective as a means of quantifying/qualifying outcome.
- 8. Proposals must avoid use of RMP funds for prohibited activities (outside RMP mission: e.g., training, research, construction, direct patient care costs).
- 9. Proposals must fully comply with Guideline requirements, unless a full explanation provides a valid reason for deviation.
- 10. Proposals must have been submitted to CHP for comment. Where comment is critical, the RAG's disposition, or realignment of the proposal should be clearly indicated. When the CHP has failed, or declined to comment, the file must be appropriately annotated.

C. "Should" Requirements

- 1. Both planning and performance of arthritis activities should reflect multi-disciplinary involvement.
- 2. Planning and performance should involve non-arthritis specialties and community resources.

- 3. Proposals should be complete with regard to the execution of activities (i.e., what is to be done, when, how, where, and by whom).
- 4. Non-RMP support should be reflected in order that the full spectrum of work can be discerned in the proposal.

STAFE REVIEW FOR ME

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A.	Ide	entification of the pilot arthritis center. The DR	RMP authority	
	add	dresses planning and development of pilot arthritis	centers. The	
	Gui	idelines extend the "institution" depiction of a ce	enter to include	<u> </u>
	the	e medical service area; i.e., the arena in which fu	nctions are	
	per	formed. In this context, a recent workshop group of	comprised of	
	aut	horities in the arthritis field noted that "a cent	er is an	
	org	ganizational plan rather than just a facility".		
	A p	principal purpose of review of grant applications f	or DRMP support	:
	of	pilot arthritis centers is the segregation of thos	e proposals whi	ch
	dis	play a "center" profile from those which do not.		Not bequite
	1.	The activities are based on, or related to:	No. Yes	
		a. large community hospital		
		b. research and teaching institution		·
	2.	c. combination of these of the control of		
	2.	provide individually, or jointly.		
		a. basic/clinical research		·
		b. research laboratory facilities		
		c. service laboratory services		
		d. in-patient clinic		
		e. out-patient clinic		
		f. professional training		
		g. patient education		
		h. public education		

		No.	Yes
3.	The treatment and care resoruces of		
	the center include services of:		
	a. Rheumatologists		
	b. Orthopaedists		
	c. Nurse or other Coordinator		
	d. Nurses		
	e. Technicians (lab & other)		
	f. Clerks		
	g. Secretary (ies)		
	h. Physical Therapist		
	i. Occupationsl Therapist		
	j. Orthotist (Broces)		
	k, Neurologist		·
	1. Physiatrist	A CANADA	
	m. Psychiatrist		
	n. Podiatrist		
	o. estamo/record personnel	marine (marine) in a	Top to a part of the part of t
	p. Social Worker	AND COMPANY AND COMPANY	
	q. Other (identify)		1
		Company of the Compan	

B. Scope of the proposal. The language of the DRMP authority, and the sense of the Guidelines, require that proposals be "pilot programs"; they cannot properly be Region-wide operational care delivery programs which attest to Regional advancement beyond the "pilot" stage; neither

should they	be isolated single activities which fall	short of	the
"organizatio	onal plan" noted in A, above.	No.	Yes
1. The prop	oosal prøesents two (2) or more	NO.	165
activity	components		
2. Componen	ts include the following:		
a. Cent	er facility development		
b. In-p	atient clinic development		
c. Out-	patient clinic development		
d. Mult	i-hospital service arrangements		
e. Mult	i-disciplinary consultation		
f. Comm	nunity teaching clinics		A. Champing Section
g. Prof	essional education		WHEN THE STREET
h. Pati	ent/family education		
i. Publ	ic education		
j. Comm	nunity/home care services		ماديكة و مد مريات موزالة مرسوا أماله
k. Data	a collection		
1. S tan	dards development		
m. Cost	of care analysis		
n. Deve	elopment of community		
	provider/consumer bodies		
c. Deve	elopment of funding sources		
p. Othe	er (specify		
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			mail () for their investigation of the control of t
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		1	*

C. Resources. Identify the total resources proposed to carry out the proposals, by source.

Provided by (indicate number)

Non-RMP RMPPersonnel Rheumatologists Orthopaedists Other qualified physicians Fellows Residents Nurses Social Workers Physical Therapists Occupational Therapists Technicians Administrative and Clerical Secretarial Other (specify) Other Clinics (space) Laboratory (space) Equipment Furniture Clinic supplies Lab supplies Theranv supplies

Provided	'nν	(indicate	number)
Provided	DΥ	(THUTCALE	II Chini CI

· · · · · · · · · · · · · · · · · · ·	Non-RMP	RMP	
Office supplies	*	#	
Travel	¥	<u>\$</u>	
Meetings/Conferences	*	·	
Printing	\$	K	
Data handling services	ý	4	
Other (specify)			

D. Extent of activities proposed. List the items under B.2., above, for which a "yes" answer was given, and for each, check the proposed extent.

List of B.2. "yes" items

Regionwide

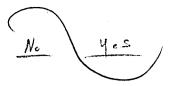
Sub-Region Selected area Population

Selecte Communit

Yes

E. <u>Categorization of the proposal</u>. The overall proposal is most accurately portrayed by the following:

- 1. <u>Definition</u>
 - à. Pilot arthritis center
 - b. Region -wide care delivery
 - c. Isolated activity



- 2. Quality (check one)
 - a. Excellent
 - b. Satisfactory
 - c. For lensalsfactory

F. Program description (reviewer discussion)

- 1. What are the problems?
- 2. What are the needs?
- 3. What is proposed to be done?
- 4. What is (are) the objective (s)?

G. Evaluation of proposal (reviewer discussion)

- 1. Background discussion
 - a. Problems
 - b. Needs
 - c. Objective
- 2. Plan
 - a. Keyed to needs
 - b. Involves cooperative

arrangements

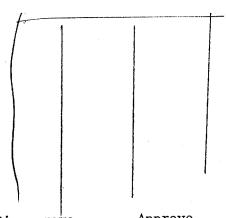
- c. Relates to other RMP programas
- d. Develops community involvement
- e. Clearly stated
- H. Implementation (reviewer discussion)
 - 1. Clear timetable
 - 2. Clear methodology
 - 3. Adequate resources

Satisfact. Excellent

- Feasibility
- Real achievements
- Effective evaluation

Recommendation I.

Proposal



Disapprove Approve

J. Suman Jehr consents

Division of Regional Medical Programs

Review of Pilot Arthritis Grant Applications Ad Hoc Technical Review Committee

1.	Applicant	
	Regi	on. follows #
2.	Backgroun	d: Briefly discuss content and adequacy of proposal with
	resp	ect to the following:
	a.	Arthritis problems
	1	Needs to overcome problems
	d.	Existing arthritis resources
3.	Purpose:	
	a.	What is proposed to be done?
	b .	Objectives
	c.	Appropriateness of activities/objectives
	d.	Feasibility of activities/objectives
	e.	Measurability of objections
4.	Plan of A	ction
	a.	Is plan keyed to expressed needs?
	b.	Does plan involve necessary Federal, State, local agencies,
	•	including voluntary groups?
	c.	Does plan utilize or strengthen existing linkages?
	d.	Does plan clearly relate components, and document commitments
5.	Implement	cation
	a.	Is a realistic timetable?

Is budget appropriate for executive of the plan?

Adequacy of potential sources of Non-RMP continuing funds.

b.

c.

Qualifications of professional and technical personnel d. who will execute the plan.

Evaluation 6.

What is the evaluation activity. a.

and females tothe with Is proposed evaluation appropriate/to the plan? ъ.

- . Are there obvious impediments to performance of the proposed evaluation?
- Overall evaluation The DRMP authority addresses planning and 7. development of pilot arthritis centers. The Arthritis guidelines extend the "institution" depiction of a center to include the medical services area; i.e., the arena in which functions are performed. In this context, a recent workshop group comprised of authorities in the arthritis field noted that "a center is an organizational plan rather than just a facility".

Check appropriate responses below, and briefly justify.

Yes

No

The proposal establishes planning and development of a pilot arthritis center

The proposal establishes planning and Ъ. development of a care delivery program which is beyond the pilot stage

Either a. or b. above is recommended for c. approval as an appropriate RMP arthritis activity.

Division of Regional Medical Programs

Ranking of Approved Applications

Α.	Pilot arthritis	s cen	ter pr	oposals	recommended	for	approval,	and
	consideration	for f	unding	through	earmarked	RMP	funds.	

In order of technical Review Committee ranking:

B. Other arthritis proposals recommended for approval, and consideration for funding through regular RMP funds.

In order of technical Review Committee ranking:

C. Arthritis proposals not recommended for approval, or funding, ranked from "Fair", to "Poor".

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3		2	3	2	2 - 6
- 4		2	3	3	3 - 9
5.		2	3	3	3 - 9
6	1	. 2	3	3	3 - 9
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	Score Ra	inge: Pil	of Center		19 - 57
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